Amended

U S Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30-2006

This report is mandatory under P.L. 85-257 as amended Failure to comply may resu	It in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440			
For Official Use Only \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT			
E				
1 File Number U 6396	2 Fiscal Year Covered From			
	1 / 1 / 2004 Through 12 / 31 / 2004			
3 Name and address of person filing	4 Name file number and address of labor organization			
Name LOUIS A VECCHIARELLI	Name [IUPAT DISTRICT COUNCIL 1			
-	Labor Organization File Number 542 840			
PO Box Bldg Room No If any NA	P O Box Building and Room Number if any NA			
Street 2170 SOUTH LIPAN STREET	Street 2170 SOUTH LIPAN STREET			
City DENVER	City DENVER			
State Colorado ZIP Code + 4 80223	State Colorado ZIP Code + 4 80223			
5 Position in labor organization BUSINESS REPRESENTATIVE	i			
Enter appropriate data below if during the past fiscal year you or your sponsor. (except as specified in the excluding loans) with ormonetary value from an employer whose employees your organizations.	usions set forth in the instructions) derived income or other economic benefit of			
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name NA	NA			
Trade Name if any NA				
P O Box Bldg Room No If any NA	7 b Amount			
Street NA				
City NA	\$0			
State ZIP Code + 4				
Signature				
15 Signature and verification The undersigned declares under penalty o submitted in this report (including the information contained in any accompar undersigned s knowledge and belief true correct and complete (See the si	lying documents) has been examined by the signatory and is to the best of the			
Signed Lowers a Verchially	On 8/14/2004 303-761 1324			

Date

Telephone Number

Name of Person Filing JOUIS VECCHIARELLI	File Number U			
B Held an interest in or derived income or economic benefit with monetary visubstantial part of which consists of buying from selling or leasing to or other of an employer whose employees your labor organization represents or is active any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	erwise dealing with the business tively seeking to represent or adirectly to or otherwise			
8 Name and address of Business (including trade name if any) Name RESILIENT FLOOR COVERING PENSION FUND Trade Name if any NA P O Box Bidg Room No if any SUITE 300 Street 985 ATLANTIC AVENUE City ALAMEDA State California ZIP Code + 4 94501 10 If 9 b or 9 c is checked give trust or employer's name Name NA Trade Name if any NA P O Box Bidg Room No if any NA	9 Business deals with X a Labor Organization b Trust c Employer 11 a Nature of such dealing REIMBURSEMENT OF EXPENSES INCURRED FOR THE SEMI ANNUAL MEETING HELD IN SAN JOSE 7/8 9/2004			
Street NA City NA State ZIP Code + 4	11 b Approximate dollar value of such dealing \$0 12 a Nature of interest held or income received REIMBURSEMENT FOR MEETING EXPENSES \$713 00 REIMBURSEMENT FOR FOOD \$245 23			
	12 b Amount \$958			
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value				
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name NA Trade Name if any NA P O Box Bidg Room No if any NA Street NA City NA State ZIP Code + 4	14 a Nature of payment NA			
13 b Is the Business an Employer or Consultant 2	14 b Amount of payment \$0			

Name of Person Filing	Louis	VECCHIARELLI	File Number U

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)	9 Business deals with		
Name IUPAT JOINT APPRENTICESHIP TRAINING FUND	a Labor Organization		
Trade Name If any NA			
PO Box Bldg Room No If any UNITED UNIONS BUILDING	b Trust		
Street 1750 NEW YORK AVENUE N W	C Employer		
City WASHINGTON			
State Distract of Columbia ZIP Code + 4 20006			
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing		
Name NA	REIMBURSEMENT FOR EXPENSES INCURRED FOR THE RULES COMMITTEE MEETING HELD IN OAKLAND CA 5/16 17/2004		
Trade Name If any NA	AIRFARE	\$432 40	
PO Box Bldg Room No If any NA	MEALS AND LODGING	\$307 54	
Street NA			
The state of the s	The state of the s		
City NA			
State ZIP Code + 4	11 b Approximate dollar value of such dealing	\$740	
	12 a Nature of interest held or income received		
	NA		
		ì	
	- Control of the Cont	***************************************	

-			
	12 b Amount	şo	

C		
Name of Person Filing LOUIS	VECCHIARELLI	File Number U

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

	O. Business deale with	
8 Name and address of Business (including trade name if any)	9 Business deats with	
Name IUPAT JOINT APPRENTICESHIP TRAINING FUND		
Table Name of the last of the	a Labor Organization	
Trade Name If any NA		
PO Box Bidg Room No If any UNITED UNIONS BUILDING	b Trust	
	c Employer	
Street 1750 NEW YORK AVENUE N W		
City WASHINGTON		
State t of Columbia ZIP Code + 4 20006		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name NA	INSTRUCTORS EDUCATION SEMINAR HELD INSTITUTE 6/19-25/2004	AT THE MARITIME
Trade Name If any NA	AIRFARE	\$404 14
Missisterium autoreum variant autoreum variant autoreum variant in der mitterfelle einem der der verber verber von eine variant autoreum variant autoreum variant autoreum variant autoreum variant va	MEAL AND LODGING	\$832 30
PO Box Bldg Room No If any NA	GRADUATION BANQULT	\$ 43 49
Street NA	GRADONITON BANGORI	\$ 43 43
City NA		
State ZIP Code + 4	11 b Approximate dollar value of such dealing	\$1 280
	12 a Nature of interest held or income received	
	AN	

	12 b Amount	\$0

DISCLAIMER

The transactions, dealings and interests that are detailed in the attached form LM 30 represent my good faith effort to reconstruct the reportable occurrences for the periods of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction dealing, or interest that should have been reported for the period of January 1, 2004 to December 31, 2004. I will file an amended Form LM 30.